



STATE OF TENNESSEE
BUREAU OF WORKERS' COMPENSATION
 220 FRENCH LANDING DRIVE
 NASHVILLE, TN 37243-1002
 WC.EDI@TN.GOV

Tennessee SROI Event Table

MTC	MTC Description	Report Trigger Criteria	Report Trigger Value	Report Limit Number	Report Requirement Criteria, (in addition to FROI)	Report Due Criteria	Report Due Value	Notes
02	Change Subsequent Report	Change of data elements 15, 55, 57, 67, 69, 70, 71, 72, 73, 74, 75, 76, or 77.	NA	>= 0	Any SROI		NA	
04	Denial after payment	Denial of claim		>= 0	At least one occurrence of Pay/Adjust segment and/or PTD segment must be present.	Date of Denial	<= 15 days	Claim Administrator is required to copy Bureau with claimant notification of denial.
4P	Partial Denial	Partial Denial of claim		>= 0	At least one occurrence of Pay/Adjust segment and/or PTD segment must be present.	Date of Denial	<= 15 days	Claim Administrator is required to copy Bureau with claimant notification of denial.
AN	Annual Periodic Report	Annual report of all open claims	Claim status = OPEN Date = June 30	>= 0		>= July 1	<= Sept 1	
AP	Acquired payment	TPA has acquired a claim and is making First Payment	>\$1.00	>= 0	AU must be on file.	Date of first payment by new TPA	<= 15 days	
CA	Change in Benefit Amount	Weekly Comp Rate has changed		>= 0	IP or AP Pay/Adjust segment 2 must be present	Date weekly comp rate changes	<= 15 days	
CB	Change in Benefit Type			>= 0	IP or AP			
CD	Compensable Death, No dependents/payees	Death of Claimant		>= 0		Date of Death of EE or date of notification of death	<= 15 days	
CO	Correction of Subsequent Report	Notification from jurisdiction of non-critical error		>= 0				
FN	Final - Medical Only	Claim Closed -- no further benefits payable. Only 1 FN allowed per claim. File amended FN if claim has further payments after FN is sent. Totals on amended FN must be cumulative totals.		1 Amended FN may be filed, will overwrite first FN.	PY required upon first medical payment. Claim type (DN74) is required on the FN.	Date of final payment of compensation	<= 30 days	
FN	Final - Indemnity claim that did not result in a permanent disability.	Claim Closed -- no further benefits payable. Only 1 FN allowed per claim. File amended FN if claim has further payments after FN is sent. Totals on amended FN must be cumulative totals.		1 Amended FN may be filed, will overwrite first FN.	IP, AP, S1-SJ Pay/Adjust segment 2 required.	Date of final payment of compensation	<= 30 days	



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SD1	Statistical Data Form Paper form, not an EDI form	Claim is settled. The SD1 paper form is required when a claim results in a permanent disability. It is usually filed by the attorney.		1	SD1 required on all Permanent disability claims.	SD1 must be presented at the time of settlement.		
FS	Employer Paid	Claimant has loss time and employer is paying so no indemnity is due	loss time > 7 days	>= 0		loss time > 7 days	<= 15 days	
IP	Initial Payment	First payment of indemnity has been made	>\$1.00	>= 0		Date of payment	<= 15 days	
IP	Initial Payment	First or subsequent payment of indemnity has NOT been made		<=0	If first or subsequent indemnity payment is not made within 20 days, a 25% penalty on the amount due to the claimant is due to be paid to the claimant.	Due Date of payment	<= 20 days eff. July 1, 2004	
P1	Partial Suspension, RTW, or Medically Determined/Qualified RTW	Indemnity benefits terminated or claimant has refused light duty work		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P2	Partial Suspension, Medical Non-Compliance	Indemnity benefits suspended		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P3	Partial Suspension, administrative non compliance	Not yet determined if compensable		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P4	Partial Suspension, Claimant Death	Indemnity benefits stopped; Claimant died unrelated to injury		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P5	Partial Suspension, incarceration	Indemnity benefits suspended; Claimant is incarcerated		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P6	Partial Suspension, Claimant's Whereabouts Unknown	Indemnity benefits suspended; Can't locate claimant		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P7	Partial Suspension, Benefits Exhausted	Indemnity benefits suspended; all indemnity benefits paid		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	



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P8	Partial Suspension , Jurisdiction change	Indemnity benefits suspended by order of jurisdiction		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
P9	Partial Suspension , Pending Settlement Approval	Indemnity benefits suspended; Pending settlement approval		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
PJ	Partial Suspension , Pending Appeal or Judicial Review	Indemnity benefits suspended pending appeal or judicial review		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
PY	Payment Report	Report payments for medical, penalty or other than indemnity.	>\$1.00	>= 0	PY required upon first medical payment. Claim type (DN74) is required on the PY. Paid to Date segment must be present.	Upon first medical payment	<=30 days	
RB	Reinstatement of Benefits	Indemnity benefits have resumed		>= 0	P1-PJ OR S1-SJ must be on file	Date of Reinstatement	<= 15 days	
RE	Reduced Earnings	Claimant has returned to work with restricted duty and is paid less than Average Weekly wage at time of injury		>= 0	IP or AP	Date of Return to Work	<= 15 days	
S1	Suspension, RTW, or Medically Determined/Qualified RTW	Indemnity benefits have been stopped due to RTW or medically qualified to RTW		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S2	Suspension, Medical Non-Compliance	Indemnity benefits have stopped because of medical non-compliance		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S3	Suspension, administrative non compliance	No compensability decision has been made to date		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S4	Suspension, Claimant Death	Indemnity benefits stopped; Claimant died unrelated to injury		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S5	Suspension, incarceration	Indemnity benefits have stopped due to claimant's incarceration		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	



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S6	Suspension, Claimant's Whereabouts Unknown	Indemnity benefits have been stopped due to claimant's whereabouts are unknown		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S7	Suspension, Benefits Exhausted	Claimant not entitled to further indemnity benefits		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S8	Suspension, Jurisdiction change	Indemnity benefits suspended by order of jurisdiction		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
S9	Suspension, Pending Settlement Approval	Indemnity benefits suspended; Pending settlement approval		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
SJ	Suspension, Pending Appeal or Judicial Review	Indemnity benefits suspended pending appeal or judicial review		>= 0	IP or AP or FS. Consecutive Suspension not allowed, RB or AP required between suspensions.	Date of Suspension	<= 15 days	
VE	Volunteer	Volunteer worker, no indemnity due		>= 0			NA	
3/1/2003	corrected trigger for Notice of Denial from 15 days to 10 days							
4/18/2003	Changed to require claim administrator to copy Bureau with claimant notification of denial.							
3/2/2004	Changed to require the PY upon payment of first medical payment of medical only, notification only or became medical only claim type.							
7/20/2004	Changed requirements on RB to include P1PJ as a prerequisite							
6/7/2010	Changed the First Payment criteria. Separated the Untimely filing of First Payment and the Untimely payment of First or Subsequent Payment.							
7/28/2010	Separated FN for medical only from FN for indemnity claims; updated PY report requirement; added SD1 to chart so adjusters would be aware of it.							
12/17/2015	04 and 4P changed to show 15 days to file denial after date of denial							